

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 OCT 27 PH 2:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000058826

1. Corporation Name

TYLER MAXX, INC.

2. Principal Office Address

1850 E. Main St.

Suite, Apt. #, etc.

City & State

Leesburg, FL

Zip

34748

Country

USA

3. Mailing Office Address

1850 E. Main St.

Suite, Apt. #, etc.

City & State

Leesburg, FL

Zip

34748

Country

USA

REINSTATEMENT 02-07

4. Date Incorporated or Qualified
To Do Business in Florida

06/26/1998

5. FEI Number

59-3519099

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Stone, Stephen M.

Street Address (P.O. Box Number is Not Acceptable)

725 N. Magnolia Ave.

Suite, Apt. #, Etc.

City

Orlando

State

FL

Zip Code

32803

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of

Registered Agent

Stephen M. Stone

REGISTERED AGENT MUST SIGN

Date

10-8-2003

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	ALLEN, TYLER	1850 E. Main St.	Leesburg, FL 34748

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Tyler Allen, President

10-8-2003

Date

407-448-2791

Daytime Phone #

CR2E081 (10/02)